

**DISCLOSURE SUMMARY PAGE**

COMMITTEE NAME (Must be same as on Statement of Organization)

Greene Co. Central Democrat CommitteeIMPORTANT: Indicate type of committee you are reporting for: ☐( 1 ) Statewide/Legislative Candidate ( 2 ) Statewide PAC ( 3 ) State Party ( 4 ) County/Local Candidate  
( 5 ) County PAC ( 6 ) Ballot Issue/Franchise Committee ( 7 ) County/City Central Committee  
( 8 ) Support State of Candidates**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Political Party

Office Sought

District (if Senate or House)

Hanna M. Lawson515-386-5675-4796 Home  
515-370-0163-Cell

SIGNATURE OF TREASURER (or person filing this report)

TELEPHONE

DATE SIGNED

**FORM  
DR-2**

(Rev. 05/2002)

DISCLOSURE  
REPORT

For Office Use Only

Comm. # 9074Indexed 5

Audited

Computer

2010 JUL 16 AM 11:10  
JACOBSON AND  
ASSOCIATES  
P.C.**Routine Penalties Due For Late Filed Reports Range from \$20 to \$800****SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:**I AM FILING A 05-15-10 & 07-14-10 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate one ☒☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

Local Committees, enter Date of Election

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a Notice of Dissolution is filed.)County & Local Committees, enter County in  
which Election is held**STATEMENT OF CASH ON HAND**CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held  
by the committee. This amount **MUST** be the same as the cash on hand at the end  
of the last reporting period, or must be zero if this is first report filed.)\$ 1009.54**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) .....

40.00

Schedule F: Loans Received total (Attach Schedule F) .....

Schedule H: Total Sales of Campaign Property (Attach Schedule H) .....

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL ..... \$

1049.54**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below) ..

161.71

Schedule F: Loan Repayments total (Attach Schedule F) .....

CASH ON HAND at the end of this reporting period (if final report, balance must  
be zero) (Attach DR-3) .....\$ 88283**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D) ..... \$**\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... \$**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) ..... \$**CANDIDATE COMMITTEES ONLY:**

CONSULTANT BREAKDOWN (Schedule G Attached?)

\_\_\_ YES \_\_\_ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

SCHEDULE <b>B</b> (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization) *Greene Co. Central Democrat Committee*

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
5/17/10	ID# CK# 534	Greene Co. Fair Assn 9. Laci Robbins 904 Emerald Ave SCRANTON 51462	Fair Booth	\$ 40.00
5/20/10	ID# CK# 535	UPTOWN CAFE 108 W. STATE JEFFERSON 50129	Culver Open House	121.71
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 161.71
TOTAL (if last page of this schedule)				\$ 161.71

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 02/96)	<b>MONETARY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Greene Co. Central Democrat Committee

**CAUTION:** Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED
4/21 10	ID#  CK#	County Convention Cash	Donation	\$ 15. <sup>00</sup>
4/21 10	ID#  CK#	Rachel Sacco 405 HOWARD St Ripley 51235	Donation	\$ 25. <sup>00</sup>
	ID#  CK#			
	ID#  CK#			
	ID#  CK#			
	ID#  CK#			
	ID#  CK#			
	ID#  CK#			
	ID#  CK#			
	ID#  CK#			
	ID#  CK#			
	ID#  CK#			
<b>SUB-TOTAL</b>				\$ 40. <sup>00</sup>
<b>TOTAL (if last page of this schedule)</b>				\$ 40. <sup>00</sup>

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.